



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-8989
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

Certificate of Competency for Plumbing

The City of Saint Paul will offer Plumbing Competency Examinations for Journey and Master Levels the first week in October 2013.

Submit applications to:

City of Saint Paul Department of Safety and Inspections
375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806

Applications are due thirty days prior to the examination date and subject to approval of the examining board. Upon approval of an application, a notice will be sent to the applicant with instructions as to when and where the examination will be held.



Richard Jacobs
Sr. Plumbing Inspector

Department of Safety and Inspections
375 Jackson Street, Suite 220
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The Most Livable
City in America



Making Saint Paul the Most Livable City in America



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Certificate of Competency Guidelines for Plumbing

Qualifications for Journey Level

- Must possess a State of Minnesota journey level plumbing license.
- Must have voucher signed by a master certificate of competency holder.

Qualifications for Master Level

- To qualify for a master certificate of competency examination, an applicant must hold a journey level certificate of competency for a minimum of one year, or be a mechanical engineer registered by the State of Minnesota.
- Must have two notarized signatures from two master certificate of competency holders.

Testing Procedures

- Applications are due thirty days prior to the examination date and subject to approval of the examining board. Upon approval of an application, a notice will be sent to the applicant with instructions as to when and where the examination will be held.
- Examinations will be graded in the presence of the plumbing examining board within thirty days of the examination.
- If an applicant fails the examination, the applicant may review the failed portion of the exam within thirty days of notification of failure, in the presence of the senior inspector.

Appeal of rejection of application or test results

- Applicant must submit a written request to appear before the examining board. After consideration of the appeal a written response will be sent to the applicant.

Testing Criteria

Exams held twice a year as scheduled
Passing score: Journey Level 70% Master 70%
Applicants may not test more than twice in any two year period.



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CERTIFICATE OF COMPETENCY APPLICATION FOR PLUMBING EXAMINATION

Circle the appropriate level:

MASTER LEVEL (Fee \$82.50 EACH)

JOURNEY LEVEL (Fee \$55 EACH)

IMPORTANT! PRINT LEGIBLY OR TYPE!

I, _____ DESIRE TO OBTAIN A CERTIFICATE OF COMPETENCY IN THE PLUMBING TRADE AS CIRCLED ABOVE AND HERewith APPLY. I HAVE FULFILLED ALL PREREQUISITES AS TO STATE LICENSE, AGE, EXPERIENCE AND/OR APPRENTICESHIP. I HAVE PAID THE REQUIRED EXAMINATION FEE WHICH IS NOT REFUNDABLE. IT IS UNDERSTOOD AND AGREED THAT SIX (6) MONTHS MUST ELAPSE BEFORE I CAN REPEAT THIS EXAMINATION AND THAT ALL RULES, REGULATIONS AND DECISIONS OF THE BOARD SHALL GOVERN IN ALL CASES.

Home Address: _____ City _____ State _____ Zip _____

Home Phone + Area Code: _____ Date of Birth: _____

Present Employer Name: _____

Employer Address: _____ City _____ State _____ Zip _____

Employer Phone with Area Code: _____

State Plumbing License Number: _____

I solemnly swear that the agreements are true to the best of my knowledge and belief and affix my signature to attest thereto.

Signature _____ Date _____

APPLICATION MUST BE SUBMITTED THIRTY (30) DAYS PRIOR TO DATE OF EXAM

APPLICANTS FOR EXAMINATION MUST HAVE VOUCHERS SIGNED AS FOLLOWS:

Master Applicants: Vouchers 1 & 2

Journeyman Applicants: Voucher 3

MASTER VOUCHER #1 FOR MASTER APPLICANTS ONLY

STATE OF MINNESOTA

COUNTY OF _____

I, the undersigned Master Plumber, swear that I have personally known:

_____ for _____ years,
Print Applicant's Full Name Above

at he/she has worked in my employ and under my direct supervision in this trade for _____ years. The applicant is a competent journeyman. I have read the above statements and believe them to be true.

Subscribed and sworn to me this day,

Notary Public

Master's Signature

State Plumbing License #

Print Master's Full Name Above

MASTER VOUCHER #2 FOR MASTER APPLICANTS ONLY

STATE OF MINNESOTA

COUNTY OF _____

I, the undersigned Master Plumber, swear that I have personally known:

_____ for _____ years,
Print Applicant's Full Name Above

at he/she has worked in my employ and under my direct supervision in this trade for _____ years. The applicant is a competent journeyman. I have read the above statements and believe them to be true.

Subscribed and sworn to me this day,

Notary Public

Master's Signature

State Plumbing License #

Print Master's Full Name Above

VOUCHER #3 FOR JOURNEYMAN APPLICANTS ONLY

STATE OF MINNESOTA

COUNTY OF _____

I, the undersigned Master Plumber, swear that I have personally known:

_____ for _____ years,
that I have read the above statements and believe them to be true. The applicant has received on-the-job and related training as provided by:

Subscribed and sworn to me this day,

Notary Public

Master's Signature

State Plumbing License #

Print Master's Full Name Above



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TO: **Journey Level Certificate of Competency Examination Applicant**

FROM: **Senior Plumbing Inspector**

RE: **Journey Level Applications**

The following information listed in order they appear on journey level application must be included:

Page 1:

- Circle either the journey or master level as appropriate
- Fill in your name, address and date of birth.
- Fill in the name and address of your present employer.
- Fill in your state journey level plumbing license number.
- Sign at the bottom of page one.

Page 2:

- Have Master Certificate of Competency holder, completely fill in information for voucher number three only and sign it and have it notarized.

Application must be printed legibly or typed!

Please Note: Persons with proper qualifications shall take the same certificate of competency examination no more than twice within any two (2) year period.

A non-refundable fee of **\$55.00** must accompany each application. Make checks payable to the "**City of St. Paul**". Remit application and fee to: **Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, MN 55101-1806**

An Affirmative Action Equal Opportunity Employer



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TO: **Master Level Certificate of Competency Examination Applicant**

FROM: **Senior Plumbing Inspector**

RE: **Master Level Applications**

The following information listed in order they appear on Master Level application must be included:

Page 1:

- Circle either the journey or master level as appropriate
- Fill in your name, address and date of birth.
- Fill in the name and address of your present employer.
- Fill in your state master plumbing license number.
- Sign at the bottom of page one.

Page 2:

- Have two Master Certificate of Competency holders, completely fill in information for voucher number one and two, sign it, and have it notarized.

Application must be printed legibly or typed!

Please Note: Persons with proper qualifications shall take the same certificate of competency examination no more than twice within any two (2) year period.

A non-refundable fee of **\$82.50** must accompany each application. Make checks payable to the "**City of St. Paul**". Remit application and fee to: **Department of Safety and Inspections, 375 Jackson Street, Suite 220, Saint Paul, MN 55101-1806**

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